		USE THIS FORM FOR ALL EN	TRIES EXCEPT C	RAFTS		
			MRS. 52 MR. 1 Barb	Entered Prev	eland YES NO vious May Shows? YES NO Smukler	
	Permanent Address 3139 Montgo STREET Student Temperative Address XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	eturn address	44122 ZIP ZIP	Cuyahoga COUNTY	Tel. 7518 5504	
CL ASS	1. MEDIUM Acrylic	cpasenting l. MEDIUM Acrylic	2	drawing 2.	MEDIUM charcoal	
HYPOTHESIS DESCRIPTION & DIMENSIONS painting 58"x52"		ZODIACAL LIGHT DESCRIPTION & DIMENSIONS painting 60"x54"		THE WITNESS DESCRIPTION & DIMENSIONS drawing 24"x30"		
NUMBER FOR SALE	NUMBER IN EDITION (GRAPHIC PRTS.) PRICE\$380.00	NUMBER NUMBER IN EDITION (GRAPHIC PRTS.)	PRICE \$380.00	NUMBER FOR SALE	NUMBER IN EDITION (GRAPHIC PRTS.)	30
Artist Barbara Smukler FIRST NAME LAST NAME		Artist Barbara Smukler FIRST NAME LAST NAME		Artist Barbara Smukbr		
	DO NOT WRITE IN THIS SECTION	17 45 ACCEPT		174 DO NO	ACCEPTED REJECTED T WRITE IN THIS SECTION	

This entry blank must be fully made out (typewritten or plainly lettered for catalog purposes) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1968.

It is also understood that accepted entries will remain on exhibition until June 16 1968.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

SUBMIT ENTRIES WITH ENTRY BLANK AND FEE MARCH 9 THROUGH MARCH 16, 1968

Submit one entry blank in triplicate per person. One copy, complete with juror's marks, will be returned to you as notification of acceptance or rejection. THIS COPY IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This form in triplicate is made up of N C R paper which does not require carbon.

REJECTED: May 6 - May 11

ACCEPTED: June 24 - June 29

Sarland muhler

RETURN DATES FOR OBJECTS — Monday through Saturday 9 a.m. — 4:45 p.m. at Museum Service Entrance